



**Northern Lakes
Community Mental
Health Authority**

**Board of Directors
Packet**

November 16, 2023



Administrative Office, 105 Hall Street, Suite A,
Traverse City, MI 49684

BOARD AGENDA

The Northern Lakes Community Mental Health Authority Board will meet on November 16, 2023 at 2:15 p.m. Cadillac Office - 527 Cobb Street, Cadillac MI and Virtual Meeting Dial 1-810-258-9588 Conference ID 986 665 315#

<u>TIME</u>	<u>ID #</u>	<u>ITEMS</u>	<u>POLICY #</u>
2:15 p.m.		Roll Call Pledge of Allegiance Appoint Timekeeper Confirmation of Quorum Consideration of Agenda Conflict of Interest Declaration	
2:20 p.m.		Consent Agenda - Board Consideration of Board Consent Agenda* 1 Board of Directors Minutes – October 19, 2023 – <i>Approve*</i> 2 Committee of the Whole Minutes –October 19, 2023 – <i>Approve*</i>	
2:25 p.m.		Citizen Comment	1.1, 3.1
2:30 p.m.	3	Chief Executive Officer’s Report - Brian Martinus, Chief Executive Officer	
2:40 p.m.		Contract Discussion/Q&A - Mark Crane, Contracts Manager	
2:50 p.m.	4	Chief Financial Officer’s Report - Richard Carpenter, Chief Financial Officer	
3:05 p.m.		Northern Michigan Regional Entity Report	3.4
3:10 p.m.		Assurance of Organizational Performance A. Receipt of CEO Monitoring Reports CEO Response to Monitoring Reports 5 2.3 Compensation of the Employed Workforce New Operational Worries B. November Monitoring Assignment 6 2.0 Global Executive Limitations (Internal)	3.0, 3.2
3:20 p.m.		Board Means Self-Assessment A. Receipt of Board Monitoring Report CEO Response to Monitoring Report 7 3.0 Global Governance Process/Ownership Linkage (Direct Inspection) *	3.2, 4.2

	8	4.0 Global Governance – Bd/CEO Linkage (Direct Inspection) *	
		B. November Monitoring Assignment	
	9	3.2 Governance Style	
	10	3.4 Annual Workplan	
3:30 pm		Governance Policies Discussion and Assessment	3.1
		A. <u>Board Chair Discussion on Bylaws and Policy</u>	
		B. <u>Governance Process/Ownership Linkage</u>	3.4
	11	a. NLD Draft Minutes – November 1, 2023	
		- Vote on NLD Recommendations*	
		- 2024 Board Meeting Schedule**	
		- 2024 Board Education & Workplan**	
		- 2024 Annual Planning Calendar (1 st 3 months)**	
		- 2024 Policy Monitoring Chart(1 st 3 months) **	
	12	b. Special Board Meeting Minutes*	
3:40 p.m.		Ownership Linkage	1.1, 3.1
		A. Citizen Comment	
		(May be limited to three minutes by Board Chairperson)	
3:50 p.m.		Announcements/Board Members Reports/Board Association	
3:55 p.m.		December 21, 2023, Agenda Planning – Traverse City	
4:00 p.m.		Meeting Evaluation/Comments/Adjournment	

NOTICE: If any person with a disability needs accommodations, please call the CEO's Office three days prior to the posted meeting date.

NEXT MEETING: December 21, 2023 – Traverse City

* Action Items, ** Action from Committee of the Whole, *** Action Other



Administrative Office, 105 Hall Street, Suite A, Traverse City, MI 49684

Board of Directors Meeting Minutes

October 19, 2023

2:30 p.m.

Board Members Present: Ben Townsend, Greg McMorrow, Mary Marois, Al Cambridge, Pam Babcock, Kate Dahlstrom, Ruth Pilon, Tom Bratton, Carol Blake, Ty Wessell, Dean Smallegan, Penny Morris, and Tony Lentych, Eric Ostergren

Virtual: David Freedman – advance notice

Absent: Sherry Powers – advance notice

Others Present: Brian Martinus, Interim Chief Executive Officer; Stacy Maiville, Executive Secretary; Dean Baldwin, Network Administrator; Brian Newcomb, Director of Recipient Rights; Darryl Washington, Chief Operations Officer for Northern Health Care Management; Dan Mauk, Chief Information Officer; Jeremiah Williams; IT Supervisor, Kim Silbör; Operations Manager

Virtual –Curtis Cummins,; Jessica Williams, Aimee Horton Johnson,; Terri Henderson, Service Information Specialist; Lisa Holmes, Chris Biggar, Amanda Ritchie, Deb Freed, Alyssa Heider,; Hilary Rappuhn, Melanie Schopieray, Tiffany Fewins, Administrative Assistant; Jeremiah Williams, Kari Barker,; Lynn Pope, Angie Griffis, Andrew Waite, Rob Palmer, Kevin Hartley, Kaitlyn Reinink, Mardi Link, Melissa Bentgen, Jan, Lauren Barnard, Cindy Petersen, Pam Petroelje, Christina Hasty, Part R, Julie Lanczki, Kiley Fields, Andrew Weiss, Jessica Hedges, Angie S., Carlton Ketchum, Candace Kauska-Dietrich

Call to Order: Mr. Ben Townsend called the meeting to order at: 2:30 p.m.

Timekeeper: Greg McMorrow

Approval of the Agenda:

Ms. Dahlstrom requested to add the CEO Search and Brickways Trail Community Living Support to the agenda.

Mr. Wessell requested to add the topic of video recording of the Board meetings to the agenda.

MOTION:	Accept the consent Agenda as amended
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	D. Smallegan
SECONDER	K. Dahlstrom

Conflict of Interest Declaration: None.

Mr. Lentych requested to pull the September Board minutes and have his motion on page 5 to reflect: "Suspend the procurement protocols and hire Rehmann Group for CFO services"

MOTION:	Accept the Board minutes as amended
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	G. McMorrow
SECONDER	T. Lentych

Citizen Comment:

Jill W.- Supports the added agenda item to record the meetings. Believes this would be a great service to the consumers and to the community who would be able to listen to the Board Meetings at any time.

Kathy Z.- Also supports the meetings being recorded. Mentioned that there are not enough facilities for those with mental illness.

Susan O. – Spoke on behalf of the Brickways Trail CLS services for IDD individuals. Gave history from 2015 and expressed her dislike for the recent change in contract with NLCMH.

Nell V.- Mother of resident from Brick ways and Trail for several years. At the meeting to support Brickways and hope to find a way to keep the trail going.

Toni S. – At the meeting to acknowledge the Incredible work that the staff is doing with Law enforcement. Happy to hear of the recent Board Retreat and would like to see the Board work more cohesively, the staff need the Board’s support and are doing their best right now.

Terri H. – Daughter is a resident at College Park operated by Brickways and Trails. Concerned about the contract not getting renewed. Worried that everything will be a new process. Would like to express what an asset College Park is to the community. Feels she is receiving little support from Northern Lakes in trying to solve this problem. Finds the situation very callous.

Carlton K. - Asks the Board to record and archive the meetings. It is very helpful as the citizens mentioned earlier. It would be very helpful for consumers to find out what is going on.

Kari Barker Director of Quality – Commends the Board regarding the discussion they are having about building a stronger Board. Shred that feedback from staff is that things are changing, administration is being transparent with staff, but what happens when a new CEO comes in? There is a gap between staff and the Board regarding the CEO search because the staff is really happy with the way things are going right now. There is a sense of ownership, trust, and pride as to what is happening. Mentioned the new communication policy Darryl Washington created, with the SAFE acronym. The policy addresses how to communicate issues that are happening within the agency so they can be resolved. A lot of work has gone into building up the agency recently. Wanted to share the feedback that the discomfort the Board feels with the NMRE oversight, the staff feel comfort.

Chief Executive Officer’s Report:

Brian Martinus, Interim Chief Executive Officer, gave the Chief Executive Officer’s Report. His report gave an overview of the audit, ProtoCall update, Center for Mental Wellness update, dates of note, Rehmann Group update, internal updates, media coverage, and update on the recent GTI payment. Mr. Martinus stated that Munson would like to take over the fiduciary role for the Center for Mental Wellness, with NLCMHA partnering and the Board would need to vote on the request.

The topic of AOT was brought up by a board member. Mr. Martinus explained that there has been high level discussion between the Medical Director and others involved in that process.

There was discussion around the Grand Traverse Center for Mental Wellness and the staffing details. It was clarified that NLCMH would still have an active role with the center along with hiring the center director. Both Munson and NLCMH would provide services.

MOTION:	Relinquish the fiduciary responsibility for the Center for Mental Wellness to Munson.
RESULT:	ADOPTED. [UNANIMOUS] 14, Y 0 N
MOVER:	G. McMorrow
SECONDER:	P. Morris

Mr. Wessell spoke about Protocall. He touched on the history of the Protocall line. He believes that there can be a better solution.

Mr. Martinus commented that to change Protocol there would need to be some clear planning behind it.

No finance report this month, Rehmann group will give a full report next month.

Northern Michigan Regional Entity Report: Recent NMRE updates were briefly discussed.

Mr. Bratton commented that the recent NMRE Meeting was centered around finances.

Assurance Of Organizational Performance:

A. Receipt of Board Monitoring Report & CEO Response to Monitoring Report.

MOTION:	The Board finds the organization in 100% compliance with policy 4.1 Consumer and Community Ends
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	P. Morris
SECONDER:	G. McMorrow

The Board finds the organization in 78% compliance with policy 2.3 Compensation of the Employed Workforce. Discussion ensued around these findings. The Chair requested Brian resubmit the report again next month with more detail.

B. New Operational Worries: None stated.

Board Means Self-Assessment:

October Monitoring Assignment:

The Board was given policies 3.0 Global Governance Process/Ownership Linkage and 4.0 Global Governance Board/CEO Linkage as their October assignment.

Governance Policies Discussion and Assessment:

A. Ends: None

B. Executive Limitations: None.

C. Governance Process/Ownership Linkage:

- a. RRAC Draft Minutes were reviewed.
- b. Board Retreat Minutes were reviewed, discussed, and voted on.

MOTION: Approve the October 2, 2023 Board Retreat Minutes

RESULT: ADOPTED. [UNANIMOUS]

MOVER: C. Blake

SECONDER: R. Pilon

c. Vote on Governance Model – Tabled

MOTION: Table the vote on governance policy until the Board has more information and the timeline to report for action is at the November Board meeting.

RESULT: ADOPTED. [UNANIMOUS]

MOVER: P. Morris

SECONDER: T. Wessell

d. CEO Search – The Board discussed the topic of the CEO search. Multiple viewpoints and ideas were expressed. Mr. Bratton made the motion to engage with the NMRE Chair to setup a CEO search

committee. Mr. Lentych supported. A great deal of discussion ensued around this topic. Mr. Bratton amended his motion to ensure the search committee had six NLCMH Board members.

MOTION: Request from the NMRE chair to assign a CEO Search committee for Northern Lakes comprised of those six individuals.

RESULT: ADOPTED. [UNANIMOUS] – 13 Y, 1 N

MOVER: T. Bratton

SECONDER: T. Lentych

e. Brickways Trails Community Living Supports

Ms. Dahlstrom stated that the topic is a concerning issues. The Board asked to have the Contracts Manager Look into this and report back next month.

f. Recording and video taping of Board meetings

Mr. Wessell explained why the Board should have their meetings video recorded, there was discussion regarding the topic.

MOTION Put meetings video recorded online and make them available to the public.

RESULT: ADOPTED. [UNANIMOUS]

MOVER: T. Wessell

SECONDER M. Marois

The CIO commented that with the roaming venues the recording of the meetings will be a challenge and while it is possible, it will be more complicated than people think.

Citizen Comment:

(Unknown) - Would like to compliment the Board for being respectful to each other during this meeting.

Encourages the new Board members to research how the Board botched the last CEO search.

Mentioned that the Mr. Martinus is doing a great job. Stated, "If you cannot agree on the governance and how you can function, why would I give you a bigger responsibility?"

Carlton K. – Thanked the Board for agreeing to archive and record the meetings.

Members expressed that they would like to see a link between the Consumer Advisory Committee and the Board. Would like to ask the CAC if they would be open to have a Board member attend the meeting.

Announcements/Board Member Reports/Board Association:

Special meeting closed session October 31, 2023, 10am.

Agenda Planning November - Cadillac

Meeting Evaluation/Comments:

- #1 – We spent our time on the most important governance topics – Excellent
- #2 – We encouraged diversity of viewpoints – Excellent
- #3 – Our decisions were made collectively – Excellent
- #4 – The Board used it's time effectively – Satisfactory

Areas of improvement: Get done on time.
Board requests a microphone for the speaker.

Adjournment: The meeting adjourned at 4:20 p.m.

Respectfully Submitted,

Ben Townsend, Chairperson

Stacy Maiville, Executive Secretary

Sherry Powers, Board Secretary

DRAFT



Administrative Office, 105 Hall Street, Suite A, Traverse City, MI 49684

**Committee of the Whole Meeting
Minutes**

October 19, 2023

12:30 PM

Board Members Present: Ben Townsend, Greg McMorrow, Mary Marois, Al Cambridge, Pam Babcock, Kate Dahlstrom, Ruth Pilon, Tom Bratton, Carol Blake, Ty Wessell, Dean Smallegan, Penny Morris, and Tony Lentych, Eric Ostergren

Virtual: David Freedman

Absent: Sherry Powers

Others Present: Brian Martinus, Interim Chief Executive Officer; Stacy Maiville, Executive Secretary; Dean Baldwin, Network Administrator; Brian Newcomb, Director of Recipient Rights; Darryl Washington, Chief Operations Officer for Northern Health Care Management; Dan Mauk, Chief Information Officer; Jeremiah Williams; IT Supervisor, Kim Silbor; Operations Manager

Virtual –Curtis Cummins, Medical Director; Jessica Williams, Performance Improvement Specialist; Aimee Horton Johnson, Office Administrator; Terri Henderson, Service Information Specialist; Lisa Holmes, Clinical Review Manager; Chris Biggar, Finance Manager; Amanda Ritchie, Improvements Coordinator, Deb Freed, Public Relations; Alyssa Heider, Recipient Rights Specialist; Hilary Rappuhn, Project Coordinator; Melanie Schopieray, Customer Service Specialist - Quality Improvement & Compliance; Tiffany Fewins, Administrative Assistant; Jeremiah Williams, Information Technology Supervisor; Kari Barker, QI Compliance Director; Lynn Pope, Angie Griffis, Andrew Waite, Rob Palmer, Kevin Hartley, Kaitlyn Reinink, Mardi Link, Melissa Bentgen, Jan, Lauren Barnard, Cindy Petersen, Pam Petroelje, Christina Hasty, Part R, Julie Lanczki, Kiley Fields, Andrew Weiss, Jessica Hedges, Angie S., Carlton Ketchum, Candace Kauska-Dietrich, Deb Freed,

Ben Townsend called the meeting to order at 12:30 p.m.

Public Comment: Rob Hentschel, Chairman of Grand Traverse Board of County Commissioners. Mr. Hentschel reflected on recent unsettling events that have happened within Northern Lakes. He stated that incidents are a more significantly failures of oversight, leadership and governance and have roots from the Carver model style of governance. Mr. Hentschel encouraged the Board to choose a traditional board model. He emphasized the Board's duty to protect, direct, and serve the organization and community's best interests. Believes Northern Lakes would be best served by a traditional model, with committees to look closer at items. Made clear that there have been no votes regarding his comments, but members of Board of Commissioners have expressed support of the items he shared.

Office of Recipient Rights Director's Report:

Brian Newcomb, Director of the Office of Recipient Rights, gave his monthly report on recipient rights. There are currently 74 open investigations. The department is at 100% compliance. At the last RRAC meeting he pointed out where the agency was 3 years ago and where they are now and the improvement that has occurred. Site visits have already begun for FY 24. In person training will begin in Jan. 2024.

There was dialogue between members of the Board and Mr. Newcomb around the accessibility of filing complaints, the department's substation rate, and what information regarding complaints is available to the public or Board.

Children with Serious Emotional Disturbance – A presentation was given to the Board about children with serious emotional disturbance by staff members, Melissa Trout, Erika Solomonson, Abby Sconfield. The presentation gave an overview of services offered to children and the intake process.

If a child meets criteria the initial intake is scheduled within 14 days. The team has 28 days to get a treatment plan going, most of the time the team can achieve this sooner.

Types of services include: Outpatient child and family therapy, home based therapy, Infant mental health, wraparound, child psychiatry, case management, dialectal behavioral therapy (DBT-A), parent supports and youth peer support, and multi system therapy (MST). There is a waiver available to those children who do not have Medicaid but need services a fit the criteria of the waiver.

Discussion on Policy Governance – The Board continued their discussion about choosing their governance model.

Many Board members raised concern that they were not given enough education about the different types of governance models. It was expressed that the Board needs to know what the other governance models are before making a decision or coming to a vote. Ms. Morris suggested putting off the vote for the governance model until the Board has more information. It was also suggested for the attorney to be involved and consulted during the decision-making process. It was mentioned that whatever model the Board chooses will impact the hiring of a CEO. It was also stated that the agenda structure is frustrating and does not allow for the Board handle issues that need to be addressed. Mr. Cambridge expressed that the Board needs to operate with a policy governance model. It does not have to be the Carver Model, but it would be in the best interest of the agency to have a policy governance model in place. Ms. Dahlstrom commented that she would like a model where the CEO is free to give input and have a better partnership with the Board.

Mr. Freedman urged the Board to look at their committee structure along with the governance models as soon as possible. He commented that the fiduciary role should be a focus of the Board along with their other responsibilities.

It was brought to the attention of the Board that the new by-laws have are in the process of being developed by the county administrators and Ms. Sarah Bannon. Multiple Board members expressed that they were not aware of this happening. Mr. Townsend reminded the Board that developing by-laws is part of the new Enabling Agreement. It was expressed that the administrators should not be the ones making the by-laws for the Board, as they may not be knowledgeable enough of what the agency needs or how the Board operates. It was stated that Board members would like to be more involved in the by-laws process and an attorney present. Mr. Wessell stated that it is time for the Board to see the by-laws draft and become involved.

Mr. Freedman encouraged the Board to take a step back and look at their goals. Make it simple and as timely as possible. Mr. Bratton supported Mr. Freedman's comment and reminded the Board that the reason why the NMRE stepped in is because the Board messed up. "When you point a finger at someone, there are always three fingers pointing back at you".

Mr. Martinus asked Board members to encourage their county administrators to get the dispute resolution committee wrapped up.

Mr. Cambridge encouraged the Board to learn from the past. To write down the things that have happened so they can use that as a learning process moving forward. He asked Board members to email their responses to Ben.

Ms. Babcock would like someone to ask Haider if all that is happening with the policies and by-laws are aligned with the authority.

Distribute Individual and Board Self-Assessments - The individual and Board Self-Assessments were given to the Board for completion. These will be due to the Executive Secretary at or before the November Board Meeting. The NLD will review the results during the January NLD meeting and report their findings to the Board at the January Board meeting.

Agenda Planning:

Next meeting is November 16, 2023 in Cadillac.

- Discussion on Protocol answering service.

Other/Adjourn: Meeting adjourned at 2:12 p.m.

Respectfully Submitted,

Stacy Maiville

Executive Secretary

DRAFT

Interim Chief Executive Officer's

Report to the Board

November 16, 2023

Citizen Comment:

Citizen's comments about meetings being video recorded and placed online - Currently NLCMHA IT department is working on recording and placing meetings online for the community viewing. The first meeting was recorded last month and uploaded to YouTube for public viewing. This will be for monthly Board meetings moving forward.

Response to citizen comment on Brick Way and Trails Contract. – Detailed report will be presented to the Board by Mark Crane today.

Citizen Comment- Acknowledged the incredible work the staff is doing with the law enforcement. Citizen was happy that the Board Retreat happened and that the Board is trying to work cohesively and reminded the Board that the staff need their support.

Special Meeting Public Comment 10/31/23- Appreciate Mr. Reed's comments. If he would like the Board and the CAC to collaborate, I encourage you to do so. If he wants to present at a Board meeting as he mentioned, then I encourage him to connect to with the Board Chairperson, Ben Townsend to arrange this.

Grants of Significant Value: None

ProtoCall Update: Attached is the Protocol Utilization Report for the past 15 months, as requested by Board of Directors.

GTI Update: NLCMHA paid the full amount of money lost.

Center for Mental Wellness Update: Architect and design team has met and has drafted initial plans that will be finalized based on existing structure of the building. Team is working with state licensing requirements to see if the draft plans fully meet licensing standards before starting the project. Project is still on scheduled to be completed by December 2024 target date.

Community Connections/Meetings:

- November 1st, NLD Meeting – 10:00-11:30
- November 6th, NMRE SUD Oversight Meeting
- November 9th, Law Enforcement Meeting
- November 10th, Veterans Day Holiday
- November 13th, CMH/DHHS – 6 County Collaborative Meeting
- November 16th, NLCMHA Board Meeting
- November 15th & 17th, PTO – Brian

- November 17th NLCMHA Art of Recovery Show Reception
- November 22nd, PTO – Brian
- November 23rd & 24th, Thanksgiving Holiday
- December 4th, NMRE Operations Committee Meeting
- December 6th, All Staff Holiday Celebration
- December 7th, RRAC Meeting – 1:00-3:30
- December 11th, CMH/DHHS – 6 County Collaborative Meeting
- December 12th, Missaukee County presentation
- December 13th, NMRE Board Meeting
- December 14th, Staff Christmas Breakfast
- December 14th, Law Enforcement Meeting
- December 25th & 26th, Christmas Holiday
- December 29th, PTO Brian
- January 1st & 2nd, New Years Holiday
- January 17th, Grand Traverse County presentation

NLCMHA Email Blast: In our most recent staff email blast we shared information on the following topics:

- Staff changes & updates
- Staff anniversaries
- Office meetings
- Staff congratulations
- Recent events
- RCA spotlight
- Enculturation Column

Media Coverage: There were some articles in the last month. I am attaching a word document of that article to this report and links are included below should you want to access them yourselves:

- <https://www.secondwavemedia.com/features/100323mmhcrisiscare.aspx>
- Location Identified, \$5 Million in ARPA Funding Approved for Mental Health Center – Attached No link provided
- Traverse City Ticker: 10.17.2023 Nursing Legislation & Mental Health Center – Attached no link provided
- https://www.record-eagle.com/news/local_news/grand-traverse-county-mental-wellness-center-moves-ahead/article_231afefa-6ded-11ee-aed2-5f8bd5f52e78.html
- TC Ticker: A Different Kind Of Youth Mental Health Solution 10272023 – Attached no link provided

- https://www.record-eagle.com/news/local_news/grand-traverse-county-mental-wellnesscenter-moves-ahead/ar9cle_231afefa-6ded-11ee-aed2-5f8bd5f52e78.html
- <https://www.woodtv.com/news/grand-rapids/more-staff-now-mdhhs-caseworkers-protest>

Respectfully submitted,
Brian Martinus, Interim CEO

Monthly Utilization Report

Customer: 354

Northern Lakes Community Mental Health Authority

Month	Total Number of Incoming Calls	Total Number of Calls Answered	Speed of Service			Average Length of Call (min)	Accessibility	
			Number of Call Answered within 30 seconds	Percentage of Calls Answered within 30 seconds	Average Speed of Answer (sec)		Abandonment Rate*	Calls Abandoned Before 30 seconds
<i>Oct 2022</i>	827	697	590	81.2	29	5.0	4.1	100
<i>Nov 2022</i>	939	856	782	89.7	21	4.4	1.8	66
<i>Dec 2022</i>	1374	1154	1053	88.2	22	3.8	3.4	78
<i>Jan 2023</i>	969	902	831	89.9	19	4.5	2.4	45
<i>Feb 2023</i>	848	745	654	85.6	24	5.3	2.5	84
<i>Mar 2023</i>	1245	1150	1053	90.2	20	3.6	1.5	78
<i>Apr 2023</i>	1532	1438	1307	89.6	20	3.1	1.4	73
<i>May 2023</i>	845	755	710	91.6	14	4.5	2.6	70
<i>Jun 2023</i>	1097	967	916	92.8	16	5.2	2.0	71
<i>Jul 2023</i>	1415	1350	1310	96.9	11	4.4	0.1	63
<i>Aug 2023</i>	654	596	585	97.2	10	5.1	1.0	52
<i>Sep 2023</i>	939	857	823	95.4	14	5.0	0.7	76
<i>Oct 2023</i>	807	737	675	89.8	17	5.8	2.0	55
Past 13 mo's	13491	12204	11289	89.7	18	4.4	1.9	911

***Definitions**

Number of Calls Answered within 30 seconds: Total number of all incoming calls not terminating prior to 30 seconds that were live answered.

Percentage of calls answered within 30 seconds: Percentage of all incoming calls not terminating prior to 30 seconds that were live answered.

Abandonment Rate: Percentage of all incoming calls not terminating prior to 30 seconds that terminated after 30 seconds prior to receiving a live answer.

Please direct questions to your ProtoCall Point of Contact

**Calls
Abandoned
After 30
seconds**

30

16

40

22

19

17

21

20

20

2

6

6

15

234

Michigan's community mental health agencies expanding crisis care

Kelsey Sanders | Tuesday, October 10, 2023

Michigan's community mental health agencies are stepping up to evolve the way they offer care to those in need — especially crisis care. Genesee Health System and Northern Lakes Community Mental Health Authority are two examples.

In 2022, approximately [20% of Michigan adults were experiencing a mental illness](#); 55.4% of them did not receive treatment. [As overdose deaths continue to rise](#), even fewer individuals with substance use disorders are receiving treatment. Millions of American adults battle serious thoughts of suicide. And more than one in ten youth experience depression that impairs their ability to function well in all aspects of their lives.

Those numbers are serious and sad. However, Michigan's community mental health agencies are stepping up to evolve the way they offer care to those in need — especially crisis care. [Genesee Health System \(GHS\)](#) unveiled their [Behavioral Health Urgent Care \(BHUC\)](#) in the fall of 2023 and it has continued to build momentum every day since.

"We assist individuals by providing on-the-spot crisis intervention, de-escalation, skill building, psychoeducation, parenting skills, assessment/referral to additional crisis support, and much more," says Lisa Bruder, GHS manager of crisis services. "The BHUC is available to anyone residing in or passing through Genesee County regardless of level of need, insurance status, or income."

The Genesee Health System BHUC is now open seven days a week. Virtual urgent care is available 24/7.

"Onsite, we offer psychiatric evaluation and medication services, crisis assessment, peer support specialists, and other needed services to enhance the safety and wellbeing of the people we serve," Bruder says. "The ability to provide immediate onsite triage and treatment has allowed us to leverage our strengths to provide a new pathway to community-based care for our community."

A BHUC clinical team provides mobile response to various educational settings through a program called U-Cares. Staff positioned inside the emergency room at Hurley Medical Center link individuals to BHUC services. GHS also provides supportive services to inmates of the Genesee County Jail.

“Our goal is to create a collaboration of safety-net providers to enhance our spectrum of crisis services to divert those in crisis from the hospital or jail,” Bruder says. “When our consumers access community-based crisis services such as mobile crisis stabilization, partial hospitalization programs, or the crisis residential unit, we see longer-lasting, more successful outcomes with significantly reduced strain on emergency services such as the ER and jail.”

A Crisis Intervention Team (CIT) connects law enforcement, mental health providers, hospital emergency services, and individuals with mental illness and their families. As an access point for Intensive Children’s Crisis Stabilization, the BHUC supports anyone in Genesee County, birth to 21 years old, experiencing a self-identified crisis or needing support.

“We have created a foundation built on the understanding that by working together, we can establish better outcomes,” Bruder says. “We want to be able to support people in the moments they need us the most. With the opening and expanding hours of the BHUC, our community no longer faces high costs associated with insufficient healthcare coverage or long wait times with limited options. By enhancing awareness of mental health, we reduce social stigma and barriers to accessing meaningful care.”

GHS also partners with the [Genesee Community Health Center \(GCHC\)](#) to provide primary care, outpatient mental health, and substance abuse treatment services as a patient-centered medical home.

“GCHC prides itself on improving health and health equity in Genesee County,” Bruder says. “We do that through the provision of high-quality healthcare services and programs in an integrated, patient-centered environment with a priority focus on homeless and public housing residents.”

Mental health crisis care expands in Northern Michigan

Thanks to \$5 million from [American Rescue Plan Act](#) funds, [Northern Lakes Community Mental Health Authority](#) (NLCMHA) will renovate the former behavioral health center at Munson Medical Center in Traverse City into a mental wellness center where all services will be located under one roof by December 2024.

“[Our goal] is to help more people, to create an access hub,” says Brian Martinus, NLCMHA interim CEO. “If someone comes in off the street and doesn’t qualify for certain community mental health services, they are presented with assessments and warm hand-offs to other agencies.”

While the project is just getting off the ground, the renovations will proceed in a three-phase approach. In phase one, NLCMHA staff will begin serving Munson patients with mental health first aid and urgent care. Phase two will create a crisis residential unit for adults seeking mental

health services at the ER. Phase three will establish a mental health urgent care facility for children and adolescents.

“We want to get people into treatment or get them the help they may need,” Martinus says. “We want to be able to give people access to treatment, to give them hope, to give them services that they need, and hopefully give them the chance to get the help they need to live a healthy, productive life.”

In June 2023, NLCMHA opened its current six-bed crisis residential unit for people who go to the hospital for mental health issues but do not meet the standard for an ER stay.

“This is a tool we’re able to use for diversion — to help people stabilize,” says Martinus. “It’s a great resource for the community and has been utilized quite extensively.”

Northern Lakes is also partnering with Grand Traverse County and Traverse City Police to expand crisis mobile services. A transition team and multidisciplinary professional team assist with transitioning consumers out of care. The new developments within the Northern Lakes community have been one of collaboration.

“These mental health support programs and developments are a true partnership between all the agencies involved,” says Martinus. “The partnership is trying to reach as many people as it can through the community, and the partnership is working in conjunction with the community to meet people where they’re at to the best of their ability.”

Recruiting the mental health workforce

In both Grand Traverse and Leelanau County, NLCMHA focuses on the need for more community resources, community connections, and offerings for both their staff members as well as for those seeking services.

“The need for mental health treatment has been on a continued increase,” says Nancy Stevenson, NLCMHA chief operations officer for Grand Traverse and Leelanau Counties.

“There are more crisis calls, more unsheltered people, more substance abuse, and there is not anywhere near enough behavioral health or mental health resources available to meet the ever more increasing need.”

To help staff increase crisis-care and other programming, NLCMHA is offering paid internships to local university students. Stevenson is also focused on building agency-wide morale to provide the best services for the community.

“It is important to me that staff feel good about themselves and the jobs they are doing — I want people to feel excited about working at NLCMHA,” Stevenson says. “I want to build a robust, well-trained, and well-respected staff and find where my employees shine and put them in the right position.”

NLCMHA and GHS are just two examples of the expansions happening in mental health crisis care throughout the state. [Collaborations with law enforcement in Washtenaw and Sanilac counties](#) divert people in crisis from jail to mental health treatment. [Psychiatric urgent care centers, like Summit Pointe's](#) in Calhoun County, are helping people in crisis 24/7. In addition to [National 988 Suicide and Crisis Lifeline](#) and the [Michigan Crisis and Access Line \(MiCAL\)](#), many [local CMHs staff their own crisis call lines](#).

Bruder concludes, “Our urgent care sets a standard of integrated behavioral health treatment that improves health equity and ensures not only the most vulnerable individuals, but all people have sufficient support to receive the care and services they need at the time of day or night they need it.”

Location Identified, \$5 Million in ARPA Funding Approved for Mental Health Center

By Beth Milligan

A location has been identified and \$5 million in American Rescue Plan Act (ARPA) funding approved for a new regional mental health center. Grand Traverse County commissioners Wednesday unanimously approved an ARPA application from Northern Lakes Community Mental Health Authority (CMH) to create a center providing 24-hour behavioral health crisis services for both adults and children, regardless of insurance or ability to pay. The new Grand Traverse Center for Mental Wellness is proposed to be located at 420 Brook Street in Munson Healthcare's behavioral health services building (pictured), which would be renovated and repurposed for the project.

County commissioners previously voted last December to set aside up to \$5 million in ARPA funding for mental health services/infrastructure. A new wellness center was discussed as a possible use for those funds, but commissioners left the exact projects/funding recipients to be decided in the future once plans were more concrete. CMH and Munson are part of a leadership team with Grand Traverse County, Northern Michigan Regional Entity (NMRE), Community Health Innovation Region, and United Way of Northwest Michigan that have been working to put a specific proposal together for the center. That proposal was presented to commissioners Wednesday, who agreed to make CMH the recipient of the \$5 million in ARPA funding.

According to CMH and Munson representatives, the new center will be developed in three phases. Phase one will bring "existing access, substance use disorder, and crisis services into a single building with services available 365/24/7 to all residents, regardless of age, insurance type, or ability to pay," according to project documents. Munson COO Laura Glenn clarified that residents means anyone in need of services, even if they live outside of Grand Traverse County or are just visiting the area.

Phase one services will include CMH Access services, crisis phone screening, a crisis hotline, mobile crisis services, a new CMH Welcoming Center, referrals/scheduling, and intervention services. Brief outpatient therapy, peer support services, and care coordination will also be offered. The center will provide space for partner community organizations – such as Addiction Treatment Services – to promote access to resources/support while "also allowing for improved care collaboration," according to the proposal. "Services not directly provided at the center will be accessible through partnerships and preferred referral relationships." Staff including master's level clinicians, peer specialists, resource specialists, and care coordinators like community health workers will be at the center during phase one.

Services would be added or expanded in additional phases as the center is developed, staff are hired, and resources are secured. "In phase two, nursing and psychiatric assessments will be added, and phase three would incorporate a Crisis Residential Unit (CRU) and/or Crisis Stabilization Unit (CSU) beds for youth and adults," according to project documents.

The ARPA funding will help cover renovations at 420 Brook Street to prepare it to serve as the new center. Munson will continue to own the building, with CMH providing programming. The total price tag for the phase one launch – including renovations and start-up costs – is estimated at \$9.8 million. Grants, including some already awarded and some that have been applied for, will help close the funding gap, project representatives said. They noted that significant grants are currently

available on the state and national level for mental health services, with private insurance providers also increasingly willing to cover crisis services. The goal is to use grant funding in the beginning to launch the center and build toward a self-sustaining model that will include insurance payments from insured clients. However, representatives reiterated that anyone will be able to get help at the center, regardless of insurance status.

Glenn said repurposing Munson's behavioral health services building – which is approximately 20,000 square feet – offers the “best option for services,” since it's in close proximity to the emergency room. One of the main goals for the Grand Traverse Center for Mental Wellness is connecting people with specialized crisis services instead of those individuals going to the emergency room or jail, locations where they often end up today that are ill-equipped to provide mental healthcare. Numerous staff from Munson's emergency department spoke in favor Wednesday of the project, citing the stress on emergency rooms from behavioral health patients and the lack of adequate resources for them there.

Representatives shared statistics to demonstrate local demand. In 2021 alone, more than 950 people were treated at Munson Medical Center's Traverse City emergency department for a suicidal-related diagnosis. “Grand Traverse 911 took more than 800 suicidal or mental health-related calls, and the Grand Traverse County Sheriff took nearly 500 separate calls that same year,” according to project documents. “The demand has continued as local communities emerged from the pandemic.”

Representatives stressed that the new center would be a collaborative community project between multiple organizations, not just Munson and CMH. In addition to the leadership team that worked on the proposal – which will transition to an operational leadership team when the center opens – a community advisory group will also provide regular input. That group, which started meeting monthly in April and is planned to have 25-30 members, will include representatives from local nonprofits, institutions, funders, community members, family members, and individuals who have personal experience with behavioral health disorders. The leadership team also plans to hire a dedicated director to oversee the center.

Glenn said that – contingent on timing for lining up architects, construction firms, and materials – the Grand Traverse Center for Mental Wellness could open for phase-one services by the end of 2024. Numerous residents spoke in favor of the project Wednesday during public comment, sharing emotional stories about family members – including some who died by suicide – whose lives could've been changed if they had access to better mental health services. In a statement, CMH Interim CEO Brian Martinus acknowledged that local need, which he hopes the center will address.

“We are grateful for the community's engagement in addressing this complex problem and the Grand Traverse County commission's consideration regarding use of the federal funds,” he said. “With a vision, strong local partnerships, and community momentum, we are positioned to increase access to quality mental health services in northern Michigan – another important piece to the puzzle we're trying to solve to get people the support they need.”



Munson to Talk Nursing Legislation, Mental Health Center with County Commission

By Beth Milligan

Munson Healthcare Chief Operating Officer Laura Glenn will appear before Grand Traverse County commissioners Wednesday to outline the hospital system's opposition to the Safe Patient Care Act, proposed legislation that would limit nurse-to-patient staffing ratios and end forced RN overtime in Michigan. Munson says the legislation would take nearly 100 beds offline across its system, adding to even longer wait times for patients – while nurses say the bills will increase patient safety and transparency and protect overworked staff.

Glenn will also give commissioners an update Wednesday on a planned new community mental health center – to be located on Munson's property – that will provide 24-hour behavioral health crisis services for adults and children.

Safe Patient Care Act

A package of bills – House Bills 4550-4552 and Senate Bills 334-336, known collectively as the Safe Patient Care Act – has generated intense debate between hospitals and nurses in Michigan, with Munson Healthcare Chief Operating Officer Laura Glenn to ask county commissioners Wednesday to join in opposing the legislation.

The bills would curb mandatory overtime for nurses, require hospitals to publicly disclose their RN-to-patient ratios, and restrict the number of patients a nurse can be assigned ([those levels would vary depending on department](#), but would generally be between 1:1 and 4:1). Several of the bipartisan bills are sponsored or co-sponsored by northern Michigan representatives Rep. Betsy Coffia (D-Traverse City) and Rep. John Roth (R-Interlochen). Coffia [said in a statement](#) that “research has shown that requiring nurses to work too many hours is both unsafe for patients and increases the likelihood of RNs leaving the profession entirely. It’s time to end this outdated and dangerous practice.”

According to the [Michigan Nurses Association](#) – citing data from the Michigan Licensing and Regulatory Affairs (LARA) – one-third of RNs with active Michigan licenses are choosing not to work as nurses. Polling data from Emma White Research shows “that the vast majority of RNs blame working conditions, not a shortage of qualified RNs, for the staffing crisis,” according to MNA. Mandatory overtime, emotional exhaustion, and nurses being assigned too many patients are contributing to that crisis, the organization states. “The number of nurses who say they know of a patient death due to nurses being assigned too many patients nearly doubled from 22 percent in 2016 to 42 percent this year,” according to MNA.

But Munson – and groups like the [Michigan Health & Hospital Association \(MHA\)](#) – say the proposed legislation is too extreme, imposing a one-size-fits-all approach on hospitals that vary greatly in their operational structures and needs between rural areas like northern Michigan and urban centers like Detroit. MHA estimates it will cost Michigan hospitals \$1.1 billion to comply with the law change and will significantly prolong the time it takes for many patients to receive care. Munson Medical Center Chief Nursing Officer Tami Putney says Munson is already short approximately 161 nurses; the organization would need an additional 417 nurses to comply with the terms of the bills. Finding – much less hiring – over 400 nurses “is not a possibility,” she says, which could require Munson to take 93 beds offline across eight hospitals, leading to “even longer wait times” for treatment.

Putney says hospital administrators and nurses share the same concern for patient safety and staff wellbeing, but believes the legislation “doesn’t address the main problem,” which is the need to build up Michigan’s talent pipeline to address its 28,000 healthcare vacancies. That includes making it easier for out-of-state nurses to work in Michigan, she says.

Mandatory overtime at Munson is also extremely rare, says Chief Marketing and Communications Officer Megan Brown. When it does occur, it’s often in units like OB and NICU where women in labor or infants need around-the-clock care. During the pay period from September 3 to 16, nurses worked a total of 13,199 four-hour blocks at Munson Medical Center, according to Brown. Only 14 of those 13,199 shifts were the result of mandatory overtime, or 0.01 percent. “This is a very typical number, which is why we say it is so rare,” she says. Still, Munson and other hospitals need flexibility to “respond to patient surges and real community needs,” according to presentation materials shared with county commissioners.

Munson plans to ask county commissioners Wednesday to talk to or write letters to their lawmakers and explain to family, friends, and neighbors why the legislation is “not the right approach to address healthcare staffing needs,” according to presentation materials. Dagmar Cunningham, an RN at

Munson Medical Center, questions why Munson's CEO "is being allowed to use a public meeting to give a presentation against bipartisan state legislation." Cunningham also plans to speak Wednesday to ensure that commissioners "hear from frontline nurses, not just hospital executives," she says.

"Their presentation even says they want to avoid a legislative hearing. What do they have to hide?" Cunningham says. "I guess it's a measure of how desperate hospital executives are to escape accountability for safe staffing and transparency. As a longtime Munson nurse, I can tell you that the staffing crisis is unprecedented and it's hurting our patients – and it's not because of a shortage of nurses. There are more than 50,000 RNs in Michigan licensed but not working, and many say they will come back if the Safe Patient Care Act is passed. Our patients deserve the Safe Patient Care Act so nurses have enough time to take care of everyone properly and our hospital can keep nurses at the bedside."

Mental Health Center

Munson's Glenn is also scheduled to give an update to county commissioners Wednesday on the new Grand Traverse Center for Mental Wellness, planned to be located at 410 Brook Street in Munson Healthcare's behavioral health services building (pictured), which would be renovated and repurposed for the project. County commissioners [previously dedicated up to \\$5 million](#) in American Rescue Plan Act (ARPA) funding for the facility. Munson and Grand Traverse County are part of a leadership team with Northern Lakes Community Mental Health, Northern Michigan Regional Entity, Community Health Innovation Region, and United Way of Northwest Michigan that put together the proposal to create a center providing 24-hour behavioral health crisis services for both adults and children, regardless of insurance or ability to pay.

According to presentation materials, an architect specializing in behavioral health facilities will have a design for the new center ready by the end of this month, after which a more detailed project budget and construction timelines will be shared. Munson is working on relocating its existing Brook Street services over to Copper Ridge to make way for the new center. A job posting for a full-time director for the center will be posted later this month.

In addition to the ARPA funds – which are primarily covering renovations at Brook Street, the relocation of Munson services, and the new director position – Munson has received a \$5 million Michigan Hospital Association grant to expand pediatric behavioral health services. Those funds will be used to "improve emergency department behavioral care coordination and wraparound strategies to treat the most complex pediatric patients," "provide psychiatric urgent care services as part of the center for pediatric patients in crisis," and "establish a pediatric crisis residential unit at the center," according to presentation materials.

Other services at the new Grand Traverse Center for Mental Wellness will include behavioral health and nursing screening assessments, a psychiatric urgent care, a "living room" model for people to remain up to a day while receiving treatment, care coordination and peer services, and a pathway for adults and children to enter crisis residential services for longer-term treatment. Short-term outpatient care will also be available, and local law enforcement will be able to bring in individuals in need of behavioral health services, according to presentation materials.

Inside The Student-Led Initiative To Fix The Youth Mental Health Crisis In Northern Michigan

By Craig Manning

If there's a solution to the youth mental health crisis, the kids will probably be the ones to find it. That philosophy is the guiding principle behind the Youth Wellness Initiative (YWI), hosted by the Grand Traverse Regional Community Foundation (GTRCF), that has convened a team of teenagers to research youth mental health in northern Michigan. While those students are working under the guidance of adults, they are ultimately the ones leading the charge on the YWI project, which has a mission no less ambitious than making northern Michigan a safer and healthier place to grow up.

Both locally and nationally, youth mental health is in the spotlight. An ARPA-funded regional mental health center [is on the way for Grand Traverse County](#), Munson Healthcare has \$5 million in state appropriations earmarked "to expand pediatric behavioral health" in northern Michigan, and Traverse City Area Public Schools (TCAPS) [will soon open a student health clinic](#) with a major behavioral health component. And on the national level, news broke this week that dozens of attorneys general from across the United States – including Michigan Attorney General Dana Nessel – [were suing Facebook parent company Meta](#) for its role in the youth mental health crisis.

Dave Mengebier, president and CEO of GTRCF, sees the YWI project as an important piece of the puzzle. Funded by a \$100,000 grant from the Michigan Health Endowment Fund, the initiative convened 14 high school students from across GTRCF's five-county service area and teamed them up with two experts: Dr. Ashley Drake, a former instructor and researcher at the University of Chicago; and Woody Smith, founder and president of the local market research and strategy firm Avenue ISR. Drake and Smith worked with the students to develop an anonymous survey of their peers, which posed questions about mental health challenges and supports.

"The idea was, rather than adults asking high school students what they thought, why don't we have high school students ask their peers what is causing them a lot of stress?" Mengebier explains. The expectation, he says, was that students might be more candid about their mental health experiences if their classmates were the ones asking the questions.

The strategy worked: 530 students from 20 different high schools responded, and that wealth of data allowed the YWI team to spring into the next phase of their project.

"Once we had the data, the high school students analyzed it, and they came up with 11 recommendations that schools, parents, or other organizations serving youth and families can consider while working to address the crisis around youth mental health," Mengebier says.

The data showed a few key findings. Beyond confirming that many high school students in the area "are experiencing significant mental wellness challenges...including anxiety and depression," the survey found that many students still see a stigma around mental health issues and "do not have anyone they would feel comfortable talking to if they were feeling sad, anxious, or hopeless."

Moreover, the survey determined that many students don't have much awareness of what mental health resources are available to them, either in their schools or out in the community.

Based on those findings, the YWI team came up with 11 recommendations across three primary categories.

First, the group encourages an expanded focus on mental health education in local school districts, with therapists and counselors talking to students about "specific emotional regulation and organizational techniques" starting as early as elementary school.

The second category, "facilitating interactions," recommends that schools work to facilitate one-on-one connections and discussions around mental health – both between students and counselors and between students and their peers.

Finally, the third category – "using safe spaces and nature to alleviate stress" – advocates for schools to provide environments and situations that might help students "decompress," whether by designating "chill-out rooms" inside school buildings or putting more of an emphasis on things like field trips and outdoor learning opportunities.

When asked whether she thinks schools or other organizations will take the recommendations to heart, Ellen Grams – one of the 14 students involved – says she's optimistic. In fact, Grams, a senior at Traverse City Central High School, tells *The Ticker* she's already observing significant positive momentum around youth mental health within TCAPS.

"I have definitely seen lots of change from my freshman year," Grams says, pointing in particular to Trojans Unite, a student-led mental health group that got its start at Central last year. "That group started through Michigan's Peer-to-Peer Depression Awareness Program, which trains schools throughout the state. I'm the co-president of Trojans Unite, and we have an Instagram account that's constantly putting out a lot of positive mental health information, from awareness around symptoms to resources that students can access."

Beyond Trojans Unite, Grams says Central has taken steps to make counselors "a lot more accessible than they were my freshman year," and has even added a "sanctuary room," an oasis of beanbag chairs and relaxed energy that offers "a place for kids to calm down."

"I think it's just been apparent that more kids are struggling," Grams says. "And because of that, the administration has been more understanding and more accommodating of kids' mental health needs."

Now, students involved in YWI are working on the next phase: a partnership with Interlochen Public Radio where they'll record, publish, and broadcast a series of podcasts based around what they've learned. Per Grams, YWI used survey findings to draft "four big questions" around youth mental health. The team will now produce four podcast episodes, with each one exploring a different one of those key questions.

"It's questions like, 'Why do students feel uncomfortable seeking help from counselors?'" Grams says. "And then we're going to be interviewing a whole bunch of people throughout the community who have experience on the topic and can speak to some of these issues. So, that could be professional psychiatrists, therapists, counselors, even students. And then we'll be prepping the interviews, conducting the interviews, and putting all that information together into a final podcast episode."

More details about the podcasts, Grams says, will be announced at a later date. The full “phase 1” YWI survey report, meanwhile, [can be found on the GTRCF website](#).



Pictured: Students involved in YWI mapping out their podcast plans at a recent workshop held at IPR.

https://www.record-eagle.com/news/local_news/grand-traverse-county-mental-wellness-center-moves-ahead/article_231afefa-6ded-11ee-aed2-5f8bd5f52e78.html

GRAND TRAVERSE COUNTY Mental wellness center moves ahead

By Bill O'brien bobrien@record-eagle.com

Oct 20, 2023

TRAVERSE CITY — Plans are moving ahead for the Grand Traverse Center for Mental Wellness as design work for the new facility will be completed this month.

Munson Healthcare Chief Operating Officer Laura Glenn on Wednesday updated Grand Traverse County commissioners on plans for the new Wellness Center to be located on Brooks Street on Munson's main campus in Traverse City. The county board in June approved \$5 million in federal ARPA funds to launch the project. Glenn said they hope to open the new facility by the end of 2024.

The center will provide area residents who have behavioral health needs with access to crisis and outpatient services, including behavioral health and nursing screening assessments, psychiatric urgent care, and pathways for children and adults to find longer-term treatment. Local law enforcement also will be able to bring individuals to the center who are in need of behavioral health services.

Short-term outpatient care will also be available.

Glenn said Munson is already working on nearly \$600,000 in renovations to its Copper Ridge complex to shift some outpatient behavioral services, in preparation for the Brooks Street building being renovated as the new Mental Wellness Center.

A detailed project budget and construction timeline for the Brooks Street facility will be presented in November.

The work at Copper Ridge is scheduled for completion in January.

Munson officials and representatives from the Northern Lakes Community Mental Health Authority are also seeking a full-time director for the center. Northern Lakes is completing a job description for the position, and recruitment will begin later this month.

Grand Traverse County Administrator Nate Alger said the county board will need to take formal action to appoint Munson Healthcare as the official fiduciary agency for the Wellness Center.

Glenn told commissioners that Munson Healthcare received a \$5 million grant from the Michigan Hospital Association to expand its pediatric behavioral health services.

Those funds will be used to establish a pediatric Crisis Residential Unit at the center, provide psychiatric care services there and expand behavioral health care coordination in Munson's emergency room.

https://www.record-eagle.com/news/local_news/northern-lakes-mental-health-agency-files-claim-for-email-hack-contract-okd-for-45k-month/article_197ca4e6-6ebc-11ee-851c-6f3b7f4355da.html

NORTHERN LAKES Mental health agency files claim for email hack; contract OK'd for \$45K/month CFO

- [By Mardi Link \[mlink@record-eagle.com\]\(mailto:mlink@record-eagle.com\)](#)
- Oct 20, 2023

TRAVERSE CITY — A local nonprofit was repaid \$100,000 of a \$283,000 loss after an unnamed staffer or staffers with Northern Lakes Community Mental Health last month provided banking information to a hacker.

Police said the hacker, posing as a representative of Grand Traverse Industries, falsely said in an email to Northern Lakes that GTI's bank information had recently been updated and requested payment for services.

The investigation into the theft remains open, Traverse City Police Department Capt. Keith Gillis said Thursday.

Northern Lakes officials previously confirmed the organization sent a \$283,000 payment in response to the unnamed hacker's request.

"That was an outside actor hacking into a computer system," Northern Lakes Interim CEO Brian Martinus said last month.

On Thursday, Martinus told the organization's board during a regular meeting that an additional \$1,859.98 had been recovered by Huntington Bank's loss department.

The payment of \$100,000 was through an insurance claim to the Michigan Municipal Risk Management Authority, Martinus said, adding that GTI is still out \$181,941.58.

The email hack is the latest financial challenge faced by the organization providing mental and behavioral health services in six counties — Crawford, Grand Traverse, Leelanau, Missaukee, Roscommon and Wexford.

The Northern Michigan Regional Entity, which manages Medicaid funds for Northern Lakes, is essentially functioning as an emergency manager after Northern Lakes placed two executives on administrative leave and the human resources officer was fired.

Joanie Blamer, chief operations officer, and Lauri Fischer, chief financial officer, were placed on leave on or before Sept. 18, pending an investigation, Martinus previously confirmed.

Martinus said these administrative leave decisions were unrelated to the email hack, but declined to comment further.

A new agreement between Northern Lakes and professional advisory firm, Rehmann, now calls for the organization to pay the firm \$45,000 a month for up to 100 hours of service plus expenses, records show.

The agreement, an unsigned copy of which was provided to the Record-Eagle, began Oct. 1 and could last two years, with contracted staff billed at between \$570 and \$225 an hour.

Rehmann will take on the responsibilities of CFO, evaluate current policies, prepare board financial reports, manage banking and cash flow and assist with fielding applicants and hiring a new CFO.

Northern Lakes is also in the midst of an audit of its financial and human resources departments, meeting minutes show, and a report on findings is expected by the end of the month.

The cost of the Rehmann contract wasn't mentioned until later in the board meeting, and appeared to alarm at least one Northern Lakes board member, Kate Dahlstrom.

"I know that we are in a unique situation and everything is in crisis mode ... I'm really unhappy with the fees," Dahlstrom said. "We have too many interims."

A Sept. 21 email from Eric Kurtz, head of the NMRE, to Northern Lakes leadership, provides some context for the costly contract.

The email from Kurtz states that the NMRE would contract with Rehmann and charge Northern Lakes for their services unless Northern Lakes contracted with Rehmann themselves.

This was necessary, Kurtz said, to make sure Northern Lakes was in compliance with government reporting requirements.

"This is NOT my preferred route, but I want to be clear that this is a matter that can't wait for another month," Kurtz said in the email.

Martinus on Thursday also told the board regarding the email hack, he'd met with GTI and with Northern Lakes' attorney, Haider Kazim, about remaining funds due GTI, and thought they might be paid, "by close of business next week."

Grand Traverse Industries is a nonprofit organization which, since 1974, has provided comprehensive services to people with intellectual and developmental disabilities.

Today, those services include career training and job experience and Executive Director Cindy Evans previously confirmed the nonprofit works through Northern Lakes to bill Medicaid.

Traverse City Police Department has served search warrants on an unnamed bank or banks; recovery chances are better if the scammer is in the US, Capt. Gillis said.

During back-to-back and hours-long meetings Thursday, board members also had substantive discussions about starting a new CEO search, archiving meeting videos, changing the governance model — how the board oversees the organization — and brainstormed future steps to to someday move beyond NMRE oversight.

One public commenter encouraged new board members considering a CEO search to review past coverage by the Record-Eagle to see how a previous search was botched.

“It was painful,” she said.

Penny Morris, who serves on the Northern Lakes board and is a Grand Traverse County commissioner, said she’s focused on the future.

“I think for all of us, bottomline is, we’re trying to turn over a new leaf,” Morris said, during discussion about archiving meeting video recordings, which the board approved.

GRAND RAPIDS

'More staff now': MDHHS caseworkers protest

by: [Meghan Bunchman](#)

Posted: Nov 1, 2023 / 03:58 PM EDT

Updated: Nov 1, 2023 / 05:37 PM EDT

GRAND RAPIDS, Mich. (WOOD) — Caseworkers from the Michigan Department of Health and Human Services picketed outside the Kent County location Wednesday.

Ongoing staffing shortages and a backlog of casework are two of the most pressing issues for these workers, who are represented by the United Auto Workers Union.

On Wednesday, about a dozen caseworkers picketed outside Kent County's department asking for politicians and the Legislature to pass more funding that they say their department desperately needs. Not only are they dealing with staffing shortages, but picketers say their technology is also outdated and faulty.

ADVERTISING

"This department is in crisis and our caseworkers, the UAW 6000 members who are child protective service workers, foster care workers ... they are overwhelmed," Ray Holman, UAW 6000 reporting secretary said. "And we have the awesome responsibility to protect the most vulnerable citizens in this state, but we don't have the tools to effectively do the job ... We need more staff and we need more staff now."



Workers with the Michigan Department of Health and Human Services protest outside the Kent County location ...[Read More](#)



Workers with the Michigan Department of Health and Human Services protest outside the Kent County location ...[Read More](#)

The Michigan Department of Health and Human Services provided a statement Wednesday:

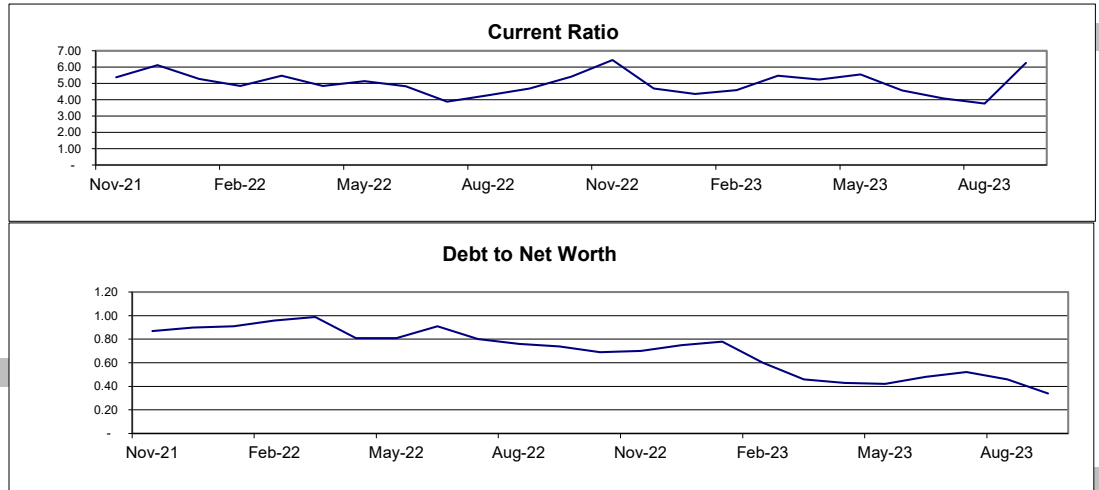
We value the contribution of every (Michigan Department of Health and Human Services) MDHHS team member to deliver much-needed assistance to Michigan families. We are all on one team working with one goal: to better serve Michiganders each day. Part of that means delivering competitive pay, premium health care/dental/eye benefits, access to a 401k that has a higher match than most employers and flexibility on work-from-home. The department has been successful in hiring more staff recently — thanks to their competitive compensation — which will help ease workload and ensure caseworkers can give their undivided attention to Michiganders who need help. We will continue to make improvements in partnership with UAW Local 6000 and all our other world-class unions that represent hardworking Michiganders in MDHHS.

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES

Northern Lakes Community Mental Health Authority
Finance Report As of 9/30/2023
Fiscal Year Ending September 30, 2023

Projected/Unaudited	92%		Actual	Actual	Percentage	Capitated	Provided	(Expenses)	Worries
	2023-#1	2023-#1							
Revenues	Total Budget	YTD Budget							
State Sources	\$ 5,222,029	5,222,029	4,807,913	(414,116)	92%				
Local Sources	\$ 2,031,467	2,031,467	2,373,783	342,316	117%	General Funds	2,741,923	1,793,562	948,361
Medicaid Sources	\$ 68,140,272	68,140,272	70,782,584	2,642,312	104%	Medicaid	63,855,577	61,185,199	2,670,378
Reimbursements	\$ 2,745,124	2,745,124	1,773,710	(971,414)	65%	Healthy Michigan	8,481,106	8,872,078	(390,972)
Northern Health Care Mgmt	\$ 11,952,470	11,952,470	10,645,029	(1,307,441)	89%	Behavioral Health Home	609,106	454,948	154,157
Total Revenues	\$ 90,091,362	90,091,362	90,383,019	291,657	100%	Northern Health Care Mgmt	10,645,029	10,538,856	106,173
						Local Requirements	2,373,783	1,081,570	1,292,213
							88,706,523	83,926,212	4,780,311
Expenditures	Total Budget	YTD Budget	YTD Expenses	(Over)/Under	YTD	Earned and allowable to retain			1,689,640
Personnel	\$ 30,356,676	30,356,676	30,043,041	313,635	99%				
Direct Operations	\$ 2,570,154	2,570,154	2,822,968	(252,814)	110%	Medicaid and Healthy Michigan Plan expenses that exceed capitation advances would need to be requested to be covered by Medicaid savings or the Medicaid Internal Service Fund held by the NMRE.			
Contractual Services	\$ 12,967,971	12,967,971	10,401,855	2,566,116	80%				
Contract Agencies	\$ 7,891,208	7,891,208	10,235,664	(2,344,456)	130%				
Residential Contracts	\$ 26,547,018	26,547,018	25,257,638	1,289,381	95%				
Inpatient Services	\$ 6,491,000	6,491,000	7,059,786	(568,786)	109%	Services/expenses which must be covered by General Funds that exceed the General Funds allocation must be covered by Local Sources or NLCMHA Fund Balance.			
Transportation	\$ 1,535,132	1,535,132	1,600,299	(65,167)	104%				
Occupied Space	\$ 1,732,203	1,732,203	2,035,442	(303,239)	118%				
Total Expenses	\$ 90,091,362	\$ 90,091,362	\$ 89,456,692	\$ 634,671	99%				
Net Revenues over Expenditures			\$ 926,327						

Monthly Indicators	Previous Month	Current Month
Current Ratio	4.08	6.25
Cash on Hand	\$ 27,265,997	\$ 20,481,795
Short Term Liabilities	\$ 6,681,072	\$ 3,277,769
<i>According to Financial Performance Indicators the goal is greater than 2.</i>		
Debt to Net Worth	0.52	0.34
Short Term Liabilities	\$ 6,681,072	\$ 3,277,769
Long Term Liabilities	\$ 2,968,615	\$ 2,968,615
Compensated Absences	\$ 1,386,866	\$ 1,386,866
Net Pension Liability	\$ 1,581,749	\$ 1,581,749
Unrestricted Fund Balance Audited	\$ 12,072,621	\$ 12,072,621
Net Assets (Undepreciated Value)	\$ 6,360,903	\$ 6,360,903
<i>According to Financial Performance Indicators the goal is less than 2.5.</i>		
Proforma YTD Fund Balance	\$ 14,586,859	\$ 13,762,261
Self Funded Health Insurance ISF	\$ 268,857	\$ 318,929
Directly provided services	39.8%	40.0%
Contractually provided services	60.2%	60.0%



**ASSURANCE OF ORGANIZATIONAL PERFORMANCE
POLICY 2.3 COMPENSATION OF THE EMPLOYED WORKFORCE
INTERNAL MONITORING REPORT - CEO
SEPTEMBER 21, 2023 /November 2023**

2.3 Compensation of the Employed Workforce

The CEO shall not:

2.3.1 Directly or by implication, promise any member or prospective member of the Workforce any direct or indirect compensation that is not reduced to writing and signed by the CEO or included in a collective bargaining agreement.

2.3.2 Offer to any current or prospective employee any status other than employment at will or modified at will according to the Discipline Review Policy (DRP) unless the employee in question is or on hiring will be covered by a collective bargaining agreement.

2.3.3 Offer or promise any member or prospective member of the Workforce compensation exceeding the fair market value of the services or that would constitute an illegal inducement under federal and state laws and regulations.

2.3.4 Financially obligate the Authority under any contract of employment or collective bargaining agreement over a longer period of time than is justified by the exercise of sound business judgment.

2.3.5 Without the prior express approval of the Board of Directors, permit the creation of any unfunded pension liability or modify or alter a pension plan in a manner that excludes a full-time employed member of the workforce from participation in a pension plan.

2.3.6 Modify his or her own wages without the approval of the Board.

CEO Interpretation September /November 2023

This Executive Limitation policy is very important and is intended to promote positive and ethical business conduct, positive employee relationships, and to avoid unnecessary risk. The policy further provides the CEO authority to create and maintain a competitive wage and benefit package to assist in staff recruitment and retention.

Specific to 2.3.1-2.3.6:

2.3.1 Directly or by implication, promise any member or prospective member of the Workforce any direct or indirect compensation that is not reduced to writing and signed by the CEO or included in a collective bargaining agreement.

Comment: When first employed, Human Resources provides a letter to all new staff (100% compliance), based on employment classification, identifying compensation. The letters are based upon position and if the position is included under a collective bargaining agreement or not. These are written to confirm employment and to specify benefits by position classification. It is not written as an employment contract. In addition, each employee signs a position description. Position descriptions are reviewed and updated when a performance evaluation is completed.

2.3.2 Offer to any current or prospective employee any status other than employment at will or modified at will according to the Discipline Review Policy (DRP) unless the employee in question is or on hiring will be covered by a collective bargaining agreement.

Comment: By policy we have adopted a modified at-will employment status for employees and apply this policy consistent with terms of any collective bargaining agreements (which by history have included “just cause” language). This is included in the employment letter.

We have three Teamster and one American Federation of State, County and Municipal Employees (AFSCME) bargaining units. These employees are covered by the respective collective bargaining agreement. All four agreements include just cause and progressive discipline language.

Administrative Policy 108.601 Discharge and Other Discipline applies to non-represented employees. This policy states: “In legal terminology, this means that each Workforce Member is employed on a modified "at will" basis. The Authority retains the final determination on all discipline including discharge.”

2.3.3 Offer or promise any member or prospective member of the Workforce compensation exceeding the fair market value of the services or that would constitute an illegal inducement under federal and state laws and regulations.

Comment: NLCMHA adopts and implements an annual Salary Schedule for all employees. Each union contract includes compensation. This schedule is developed in consideration of fair market value primarily based on the most current Michigan Community Mental Health Association Salary and Benefit Survey, which NLCMHA participates in, supplemented with other available comparison documents, e.g. other surveys for comparable positions, department of labor statistics and any other available data. Any changes to workforce compensation must be consistent with available funding. Health insurance benefits are consistent with state law capping costs which are updated annually. Both labor unions (AFSCME and Teamsters) have current three-year contracts. The Teamsters contracts run through 2025 NLCMHA and AFSCME have ratified and approved a new collective bargaining agreement.

In January of 2023, NLCMHA provided a Cost of Living of 4% to Teamsters-represented and non-represented staff.

2.3.4 Financially obligate the Authority under any contract of employment or collective bargaining agreement over a longer period of time than is justified by the exercise of sound business judgment.

Comment: As previously stated employment is modified at-will and is not based on an employment contract. Presently 25% of the workforce is covered by the Teamster’s Clinical Union Traverse City, 19% is covered by the Teamsters Union SE, 10% is covered by the Teamster’s Support Union, 12% is covered by the AFSCME Union and 34 % of the workforce is not part of a collective bargaining unit.

NLCMHA continues to utilize a mixed business model in that we both employ and contract for services. This model has worked well across our six county service area. We develop and enter into a large number of individual and organizational contracts. This supports individual choice, but creates significant transaction cost and network management challenges. Additionally, our Prepaid Inpatient Health Plan, Northern Michigan Regional Entity (NMRE), has been providing resources for regional contracting, especially with community hospitals.

2.3.5 Without the prior express approval of the Board of Directors, permit the creation of any unfunded pension liability or modify or alter a pension plan in a manner that excludes a full-time employed member of the workforce from participation in a pension plan.

Comment:

The defined benefit pension plan administrated by MERS, that had been available to former employees of Grand Traverse County and Great Lakes CMH continues to be underfunded. The actuarial report received in 2023 for calendar year 2022 is highlighted below. Northern Lakes CMHA makes all required minimum deposits and has accepted an accelerated payment plan that in theory, would pay the unfunded liability a few years sooner.

No full-time workforce members have been excluded from pension plan participation.

2.3.6 Modify his or her own compensation without the approval of the Board.

Comment: The CEO salary is established by formal board action subsequent to the completion of the annual organization/CEO performance review and consistent with Board Governance Policy 3.9.

Respectfully submitted,

Brian Martinus
Interim CEO

Board Policy being monitored:
2.3 Compensation of the Employed Workforce
September 21, 2023/November 16, 2023

1. Was this report submitted when due?
Yes No (requires no comment)

Comment:

2. Did the report lay out the CEO's interpretation of the request?
Yes No (requires no comment)

Comment:

3. Was I convinced that the interpretation is justified and reasonable?
Yes No (requires no comment)

Comment:

4. Did the interpretation address all aspects of the subject?
Yes No (requires no comment)

Comment:

5. Does the information show compliance with board direction/policy?
Yes No (requires no comment)

Comment:

6. Other Comment: _____

ASSURANCE OF ORGANIZATIONAL PERFORMANCE
Board Policy Monitoring – 2.0 GLOBAL EXECUTIVE LIMITATIONS
INTERNAL INSPECTION - CEO
NOVEMBER 16, 2023

2.0 Global Executive Limitations

The Chief Executive Officer shall not cause or allow any practice, activity, decision, or organizational circumstance which is either unlawful, imprudent or in violation of commonly accepted business and professional ethics.

CEO Interpretation November 2023:

Section 1 and Section 2 of the Board Governance Policies are reviewed in the section of our Board meeting agenda titled “Assurance of Organizational Performance”. Section 2 is Executive Limitations and Policy 2.0 defines Global Executive Limitations. This policy expresses the Board’s broad expectation for CEO performance and defines the parameters within which the CEO can operate. This captures the essence of the Carver Policy Governance Model delineating the separation of the governance function of the Board and the management function of the CEO. I understand and am firmly committed to this over-arching policy that I shall not cause or allow any practice, activity, decision, or organizational circumstance, which is either unlawful, imprudent or in violation of commonly accepted business and professional ethics. This policy is further delineated into Executive Limitation Policies 2.1-2.10 that have been monitored throughout this calendar year, 2023. I believe that as the Interim CEO, I have complied with Policy 2.0 and I will continue to act immediately if there is a suspicion of possible violation of this policy and will continue to attempt to prevent such an occurrence through the Leadership Team, legal counsel and a continual focus on Risk Management.

Respectfully submitted,

Brian Martinus
Interim CEO

Board Policy being monitored:

2.0 Global Executive Limitations

November 16, 2023

1. Was this report submitted when due?
Yes No (requires comment)

Comment:

2. Did the report lay out the CEO's interpretation of the request?
Yes No (requires comment)

Comment:

3. Was I convinced that the interpretation is justified and reasonable?
Yes No (requires comment)

Comment:

4. Did the interpretation address all aspects of the subject?
Yes No (requires comment)

Comment:

5. Does the information show compliance with board direction/policy?
Yes No (requires comment)

Comment:

6. Other Comment: _____

**CEO Response to October 19, 2023 Board Means Monitoring Report Evaluation-
November 16, 2023**

Policy 3.0– Global Governance Process/Ownership Linkage – Direct Inspection

Nine (9) Members completed and submitted the monitoring report. There were Fourteen (14) Board Members attending:

Question One – Do you believe we are in strict compliance with the policy as stated for each provision?
7 – Yes, 2 – No

Question Two – If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are not in compliance?

Comment:

1. “ Have no information that the right amount of money/resources to the right people at the right time”.
2. “We have had several unacceptable actions & situations, 1- involved in transferring money to the wrong bank account, with staff trying to hide the information.

Question Three – How do you think we could improve our process to be in full compliance?

Comment:

1. “When Brian became Interim CEO, it should have been made clear to him, the board and the CMH staff that he had all the responsibility for the effective management of the affairs of the authority”.
2. “Change governance model, require dashboard.”

Question Four – What do we need to learn or discuss in order to live by this policy more completely?

Comment: 1. Reminders to board members.

2. Follow our own by-laws, and discuss these issues completely so that we are clear about what we are doing – be more future oriented about what we expect and what options are if we need to change course”.

3. “That the Board has an oversight role.”

Question Five – Does this policy remain in compliance with the Policy Governance model in terms of content and format?

8 – Yes, 1- No

CEO Response 2023:

I appreciate the Board’s assessment that we are in 78% compliance with this policy.

Question 2, comment 1: The Rehmann Group is currently working to cost set money and resources to the right departments.

Question 2, comment 2: A policy has been put in place to prevent this from happening to the agency in the future. The policy did not exist until this incident.

Question 3, comment 1: This was made known the Board and staff, but some members of the Board and staff did not fully embrace this concept.

Question 3, Comment 2: To change the governance model, it would take a unified Board collectively working together on behalf of the agency and the consumers that the agency serves. This would send clear guidance and direction to the CEO and the staff to follow, to improve services to the community. If the changing of the governance model will accomplish this, I would encourage the Board to put aside their personal differences and work on behalf of those we serve.

Question 4, comment 1: Recently the Board Chair has put more emphasis on the Monitoring Reports, this should help with reminders about the policies.

Question 4, comment 2: Great idea, I encourage you to do so.

Question 4, comment 3: The Board does have an oversight role. I encourage the Board to continue to steer NLCMHA in a positive direction.

Respectfully Submitted,

Brian Martinus
Interim CEO

**CEO Response to October 19, 2023 Board Means Monitoring Report Evaluation
November 16, 2023**

Policy 4.0 Global Governance-Board/CEO Linkage - Direct Inspection

Nine (9) Board Members completed and submitted the monitoring report. There were Fourteen (14) Board Members attending:

Question One - Do you believe we are in strict compliance with the policy as stated for each provision? – **8 Yes, 1 No**

Question Two – If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are not in compliance? – **Comment: 2.5.7 - CMHA public image and credibility is endangered that hinders accomplishing mission”.**

Question Three – How do you think we could improve our process to be in full compliance? – **Comment: “Ask CEO for a corrective plan of action and ask him to report back how it is working.”**

Question Four – What do we need to learn or discuss in order to live by this policy more completely? – **Comment: “Continuing Board education and policy review.”**
2. “Consistency in following our policies and holding ourselves accountable. Hold CEO accountable for behavior of workforce and provide training & make corrections as needed”.

Question Five - Does this policy remain in compliance with the Policy Governance model in terms of content and format? – **9 Yes**
Comment: None.

CEO Response 2023:

I appreciate the Board’s assessment that we are in 89% compliance with this policy.

Question 2, comment 1: I would agree that NLCMHA public image needs to improve. I am currently working with several organizations to rebuild fractured relationships between CMH and community partners. Public image can also be improved upon through functioning Board meetings where Board members communicate effectively and work on behalf of the consumers across the six counties.

Question 3, comment 1: In order to be a self-correcting agency, assessments and corrective actions are needed in order to improve outcomes.

Question 4, comment 1: Continuing education and policy review should take place within the committee structure and the Board.

Question 4, comment 2: Consistency and following policy is the standard. CEO must follow the agency policies and procedures.

Respectfully Submitted,

Brian Martinus
Interim CEO

**BOARD MEANS SELF-ASSESSMENT
POLICY 3.2 GOVERNANCE STYLE
DIRECT INSPECTION
NOVEMBER 16, 2023**

3.2 GOVERNANCE STYLE

The Board's responsibilities are defined by and derive from the fiduciary role of the Authority as an essential link in the continuum of public and private entities and agencies that serve the mentally ill, intellectually/developmentally disabled and substance use disorder populations residing in the Authority's service area. The Board's proper sphere of activity lies in:

- 3.2.1 Establishing broad policy for conducting of the affairs of the Authority; and
- 3.2.2 Engaging in strategic planning, promoting community and intergovernmental relations; and
- 3.2.3 Ensuring that governance decisions are made only after open, full and fair consideration of the views of diverse stakeholders.

The Board governs, but does not manage, the affairs of the Authority. The Board delegates to the CEO the exclusive responsibility for the effective management of the affairs of the Authority. In carrying out its mission, the Board accords the highest value to vision, leadership, consensus and a proactive approach. Therefore:

- 3.2.4 The Board cultivates a sense of group responsibility. The Board, not the CEO, is responsible for excellence in governance.
- 3.2.5 The Board initiates policy and does not merely react to management initiatives.
- 3.2.6 The Board uses the expertise of individual members to enhance the ability of the Board as a governing body but does not use such individual expertise as a substitute for the collective judgment, wisdom and values of the group.
- 3.2.7 The Board governs the Authority through the adoption of Board Governance Policies reflecting the Board's values and perspectives.
- 3.2.8 The Board's focus is the adoption and realization of Board Governance Policies in the political and financial environment in which the Authority operates. The Board does not focus on management of the Authority. The Board acknowledges management is the proper sphere of the CEO.
- 3.2.9 The Board and its members shall exercise that degree of discipline necessary to attain excellence in governance. This principle applies to attendance, preparation for meetings, adherence to Board Governance Policies, respect for roles and procedures, observance of common courtesy, and development of governance skills.

3.2.10 The Board allows itself to address a specific topic or issue only after determining:

Whether a topic or issue is properly one for Board consideration; whether the topic or issue addressed by existing Board Governance Policies; and if so, whether the Board wishes to modify existing Board Governance Policies.

3.2.11 The Board takes responsibility for the Authority's organizational performance by:

3.2.11.1 Enumerating those powers reserved by the Board to the Board because they are deemed to be necessary for effective governance;

3.2.11.2 Adopting Board Governance Policies setting forth in clear language any limitations or constraints placed on the CEO's management of the affairs of the Authority;

3.2.11.3 Adopting Ends policies specifying desired outcomes for the Authority as an organization and for the Board and for management as constituent parts of the organization;

3.2.11.4 Holding the CEO accountable for achieving Board Ends policies; and

3.2.11.5 Creating an effective system for monitoring and measuring the effectiveness of the Board. The Northern Lakes Community Mental Health Authority Board of Directors believes in excellence in board governance. It believes that through self-evaluation it can determine if it has functioned the way it said it would and that this process will promote the continued improvement of board leadership. This will be accomplished through continued board means policy monitoring, meeting evaluation, individual board member self-evaluation and Board self-evaluation. The individual and Board evaluations shall be completed each October and reviewed at the November Board meeting. The Board may also periodically engage an independent consultant. Based on the evaluation results the Board may develop a governance improvement plan.

Board Means Policy Being Monitored:

3.2 GOVERNANCE STYLE

NOVEMBER 16, 2023

Review all sections of the policy listed and evaluate our compliance with policy.

1. Do you believe we are in strict compliance with the policy as stated for each provision?

Yes No (requires comment)

2. If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are *not* in compliance?

3. How do you think we could improve our process to be in full compliance?

4. What do we need to learn or discuss in order to live by this policy more completely?

5. Does this policy remain in compliance with the Policy Governance model in terms of content and format? Yes No (requires comment)

**BOARD MEANS SELF-ASSESSMENT
POLICY 3.4 ANNUAL WORK PLAN
DIRECT INSPECTION
NOVEMBER 16, 2023**

3.4 ANNUAL WORK PLAN

To promote excellence in governance and to provide the CEO with timely policy guidance upon which to predicate management planning and budgeting, the Board shall, at the commencement of each new calendar year, establish a one-year cycle of activities (“Annual Workplan”) focused on the review and possible amendment of Board Governance Policies. The Annual Workplan may include educational events, study sessions, stakeholder meetings, presentations by experts in relevant fields and other enriching activities that are designed to provide Board members with the greatest possible insight into Board governance policy options. The Annual Workplan established by the Board shall make provisions:

- 3.4.1 For a determination of the Board’s priorities for activities and programs during the calendar year;
- 3.4.2 For a tentative schedule of programs, joint meetings and study sessions; and
- 3.4.3 For periodic review of monitoring data concerning progress in achieving the Board Governance Policies.

Board Means Policy Being Monitored:

3.4 ANNUAL WORK PLAN

NOVEMBER 16, 2023

Review all sections of the policy listed and evaluate our compliance with policy.

1. Do you believe we are in strict compliance with the policy as stated for each provision?
Yes No (requires comment)

2. If you indicated that the Board is not in full compliance with the policy as stated, please indicate what areas and what you notice that gives evidence that we are *not* in compliance?

3. How do you think we could improve our process to be in full compliance?

4. What do we need to learn or discuss in order to live by this policy more completely?

5. Does this policy remain in compliance with the Policy Governance model in terms of content and format? Yes No (requires comment)



Administrative Office, 105 Hall Street, Suite A, Traverse City, MI 49684

Nominating and Leadership Development Committee Meeting Minutes

November 1, 2023

10:00 AM

Attendance:

Greg McMorrow called the meeting to order at 10:02 a.m. at 527 Cobb Street, Cadillac and virtual.

Board Members Present: Pam Babcock, Greg McMorrow, Ruth Pilon, Mary Marois, Carol Blake,

Others Present: Brian Martinus, Interim Chief Executive Officer; Stacy Maiville, Executive Secretary; Rex Wolfsen, Roscommon County Commissioner.

MOTION:	Approve the Agenda
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	M. Marois
SECONDER	R. Pilon

MOTION:	Approve the September 8, 2023 Minutes
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	M. Marois
SECONDER	R. Pilon

Structure of Meetings: The question was raised about changing the structure of the Board Meetings to combine the Committee of the Whole with the Board Meeting. Currently there is a redundancy between the COW and Board. The current structure is inefficient and there is wasted time between the meetings.

It was decided to suggest to the Board to do away with the COW and start the Board Meeting at 12:30pm. There would still be discussion and education but it would all be during one meeting so action can be taken on issues.

The Board Education time slot would remain the same and be used if needed.

MOTION:	Do away with the designation of the COW, start the board meeting at 12:30pm and adjust the agenda as needed to comply with that.
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	M. Marois
SECONDER	C. Blake

2024 Calendars:

Annual Planning Calendar: - There was much discussion around the Annual Planning Calendar. It was decided that the NLD will approve and plan for the next three months and not approve the entire calendar. It was suggested that the NLD will start planning three months out and decide what they want to ask the staff and learn about for upcoming meetings. The committee discussed the need for the Board to know more about the happenings within the agency and the desire to hear about the different departments more than once a year.

The topic was brought up of including in the Annual Planning Calendar: outreach to the community, stakeholder meetings, and community collaborative. It was identified that these types of meetings are addressed in the Board Education & Work Plan Calendar. It was suggested to possibly move these to the Annual Planning Calendar.

Ms. Marois brought up the idea of the Board having a dashboard. The dashboard will help identify if the Board and agency is on target. Ms. Blake also suggested the Board have a checklist of items that need to be accomplished.

Mr. Martinus reminded the NLD that the Strategic Plan will run out at the end of 2024, the Board will need to come together over the next 11 months to develop a new plan. Mr. McMorrow stated that there may need to be a subcommittee to work on the Strategic Plan.

Mr. McMorrow urged the committee to be mindful that Board members are volunteers and have other obligations. It would take a lot of time and commitment from the Board members to achieve all the items listed on the calendar.

The NLD reviewed the upcoming three months of the Annual Planning Calendar and made the following Changes/decisions:

December -

- Remove Board Leadership Journal from the calendar
- Look over the survey sent out to the commissioners – Teams meeting on 11/13/23
- Would like to request additional information given during the ORR report in regard to limitations and jurisdiction.

January –

- Ownership Linkage Plan - The item will stay on the planning calendar, and as a standing item on each agenda, but the NLD hopes to put more focus on the linkage plan. The NLD would like to see the Board to develop better connections with the communities and link better with the organizations.

- Give the Annual Review 1 hour

February - TBD

It was suggested the NLD ask the Board, who in the community they are looking to develop ownership linkage and connections with.

Policy Monitoring Calendar:

Ms. Marois recommended to not approve, believes the monitoring reports are not working. The monitoring schedule should be done in conjunction with developing a dashboard.

The NLD decided to approve monitoring schedule for next 3 months.

MOTION:	Accept the Monitoring Calendar for the next three months.
RESULT:	ADOPTED. [UNANIMOUS]
MOVER:	M. Marois
SECONDER	C. Blake

Board Meeting Schedule:

- Recommend the start time of the Board to 12:30 p.m.

Board Education & Training Topics:

November – How to access services

December – Bob Sheehan CCBHC Change the time allotment start at noon – one hour.

January 2024 – Redbook Training

Public Comment: None

Next Meeting: January 3, 2023

Meeting adjourned at: 12:03 p.m.

Respectfully Submitted,

Stacy Maiville, Executive Secretary



Administrative Office, 105 Hall Street, Suite A, Traverse City, MI 49684

Board of Directors Meeting Minutes

October 31, 2023

Special Meeting

11:00 a.m.

Board Members Present: Ben Townsend, Greg McMorrow, Mary Marois, Al Cambridge, Kate Dahlstrom, Ruth Pilon, Tom Bratton, Carol Blake, Ty Wessell, Dean Smallegan, Penny Morris, and Tony Lentych, Eric Ostergren

Absent: Sherry Powers, Pam Babcock – advance notice

Others Present: Brian Martinus, Interim Chief Executive Officer; Stacy Maiville, Executive Secretary; Neil Rojas, Human Resources; Haider Kazim, Attorney; Andrew Berge, Attorney, Justin Reed

Call to Order: Mr. Ben Townsend called the meeting to order at: 11:00 a.m.

Confirmation of a Quorum- Confirmed.

Pledge of Allegiance- Completed

Public Comment:

Justin Reed- Mr. Reed spoke and gave citizen comment, he stated that the Board’s collaboration with the CAC would be a wonderful idea. He also spoke about an article the Record Eagle recently published. Mr. Reed commented that “the Record Eagle does a one-sided argument about NLCMH and not take the time to look at the whole picture and often get the facts wrong”. He also mentioned that The Clubhouse keeps trying to get a positive story to Record Eagle which keeps getting denied. He stated, “If people want to have the worst stories, they can go to the Record Eagle. It seems like every time something happens at CMH someone from the Board or County Commissioner goes to the Record Eagle, and that is trouble because anytime you want to go to the bottom of the barrel in Traverse City, you go to the Record Eagle, there are no positive stories in the Record Eagle”.

Mr. Reed also touched on the CEO search and suggested the search committee includes a consumer from each county during the selection process.

Mr. Reed also commented on Brickways and stated “a friend had to be moved due to the recent Brickways change and had to move a chair to the new place. The staff told him to “rent a truck” to move the chair. That is wrong. The person (friend) who was at Brickways felt very unsafe being there, so he is no longer at Brickways. So, to have the contract that CMH has with Brickways, and Brickways not meeting the standards, I can see why CMH wants to pull away from Brickways.”

Mr. Reed also commented that he believes Ben, the Chairman of the NLCMHA Board, is doing a good job. He also requested to present at an upcoming meeting about items he learned at the recent Clubhouse Conference.

MOTION: Go in to closed session according to MCL 15.268(1)(h))
RESULT: ADOPTED. [UNANIMOUS]
MOVER: T. Lentych
SECONDER M. Marois
Roll Call Vote 13 Y, 0 N

The Board moved out of closed session at 12:10 p.m.

MOTION: Follow the recommendation and advice of counsel.
RESULT: ADOPTED. [UNANIMOUS]
MOVER: G. McMorrow
SECONDER M. Marois

MOTION: Adjourn
RESULT: ADOPTED. [UNANIMOUS]
MOVER: T. Wessell
SECONDER P. Morris

Adjournment: The meeting adjourned at 12:15 p.m.

Respectfully Submitted,

Ben Townsend, Chairperson

Stacy Maiville, Executive Secretary

Sherry Powers, Board Secretary
